

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

|  |  |                    |   |                          |  |                             |   |                          |  |
|--|--|--------------------|---|--------------------------|--|-----------------------------|---|--------------------------|--|
| Name of Committee in Full<br><b>Franklin County Libertarian Party - General Fund</b> |  |                    |   |                          |  |                             |   |                          |  |
| Full Name of Contributor<br><b>Mark Noble</b>  |  |                    |   |                          |  | Registration Number, if PAC |   |                          |  |
| Street Address<br><b>723 Springs Dr</b>  |  |                    | Employer/Occupation/Labor Organization* |                          |  |                             | Form (Cash, Check, etc.)<br><b>direct deposit</b> |                          |  |
| City<br><b>Columbus</b>  |  | State<br><b>OH</b> |   | Zip Code<br><b>43214</b> |  | M<br><b>0</b>               |   | D<br><b>5</b>            |  |
|  |  |                    |   |                          |  | Y<br><b>2</b>               |   | Amount<br><b>\$17.76</b> |  |
| Full Name of Contributor<br><b>Bob Bridges</b>                                       |  |                    |   |                          |  | Registration Number, if PAC |   |                          |  |
| Street Address<br><b>2724 Christina Blvd</b>   |  |                    | Employer/Occupation/Labor Organization* |                          |  |                             | Form (Cash, Check, etc.)<br><b>cash</b>           |                          |  |
| City<br><b>Columbus</b>  |  | State<br><b>OH</b> |   | Zip Code<br><b>43231</b> |  | M<br><b>0</b>               |   | D<br><b>5</b>            |  |
|  |  |                    |   |                          |  | Y<br><b>1</b>               |   | Amount<br><b>\$5.00</b>  |  |
| Full Name of Contributor<br><b>Bill Yarbrough</b>                                    |  |                    |   |                          |  | Registration Number, if PAC |   |                          |  |
| Street Address<br><b>6300 Hilltop Trail Dr</b>                                       |  |                    | Employer/Occupation/Labor Organization* |                          |  |                             | Form (Cash, Check, etc.)<br><b>cash</b>           |                          |  |
| City<br><b>New Albany</b>  |  | State<br><b>OH</b> |   | Zip Code<br><b>43054</b> |  | M<br><b>0</b>               |   | D<br><b>5</b>            |  |
|  |  |                    |   |                          |  | Y<br><b>1</b>               |   | Amount<br><b>\$5.00</b>  |  |
| Full Name of Contributor<br><b>Chris Hayhurst</b>                                    |  |                    |   |                          |  | Registration Number, if PAC |   |                          |  |
| Street Address<br><b>2728 Proclamation Way</b>                                       |  |                    | Employer/Occupation/Labor Organization* |                          |  |                             | Form (Cash, Check, etc.)<br><b>check</b>          |                          |  |
| City<br><b>Columbus</b>  |  | State<br><b>OH</b> |   | Zip Code<br><b>43207</b> |  | M<br><b>0</b>               |   | D<br><b>5</b>            |  |
|  |  |                    |   |                          |  | Y<br><b>1</b>               |   | Amount<br><b>\$20.00</b> |  |
| Full Name of Contributor<br><b>Casey Borders</b>                                     |  |                    |   |                          |  | Registration Number, if PAC |   |                          |  |
| Street Address<br><b>2683 Hoover Crossing Way</b>                                    |  |                    | Employer/Occupation/Labor Organization* |                          |  |                             | Form (Cash, Check, etc.)<br><b>check</b>          |                          |  |
| City<br><b>Grove City</b>  |  | State<br><b>OH</b> |   | Zip Code<br><b>43123</b> |  | M<br><b>0</b>               |   | D<br><b>6</b>            |  |
|  |  |                    |   |                          |  | Y<br><b>0</b>               |   | Amount<br><b>\$17.76</b> |  |
| Full Name of Contributor<br><b>Mark Noble</b>  |  |                    |   |                          |  | Registration Number, if PAC |   |                          |  |
| Street Address<br><b>723 Springs Dr</b>  |  |                    | Employer/Occupation/Labor Organization* |                          |  |                             | Form (Cash, Check, etc.)<br><b>direct deposit</b> |                          |  |
| City<br><b>Columbus</b>  |  | State<br><b>OH</b> |   | Zip Code<br><b>43214</b> |  | M<br><b>0</b>               |   | D<br><b>6</b>            |  |
|  |  |                    |   |                          |  | Y<br><b>2</b>               |   | Amount<br><b>\$17.76</b> |  |
| Full Name of Contributor<br><b>Miscellaneous under \$25 - Comfest</b>                |  |                    |   |                          |  | Registration Number, if PAC |   |                          |  |
| Street Address   |  |                    | Employer/Occupation/Labor Organization* |                          |  |                             | Form (Cash, Check, etc.)                          |                          |  |
| City   |  | State<br><b>OH</b> |   | Zip Code                 |  | M<br><b>0</b>               |   | D<br><b>6</b>            |  |
|  |  |                    |   |                          |  | Y<br><b>2</b>               |   | Amount<br><b>\$23.00</b> |  |
| Full Name of Contributor<br><b>Miscellaneous under \$25 - Comfest</b>                |  |                    |   |                          |  | Registration Number, if PAC |   |                          |  |
| Street Address   |  |                    | Employer/Occupation/Labor Organization* |                          |  |                             | Form (Cash, Check, etc.)                          |                          |  |
| City   |  | State<br><b>OH</b> |   | Zip Code                 |  | M<br><b>0</b>               |   | D<br><b>6</b>            |  |
|  |  |                    |   |                          |  | Y<br><b>2</b>               |   | Amount<br><b>\$20.80</b> |  |

\* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]

Page Total **\$127.08**